



Please note this is a system generated document. Kindly scan the QR code above to ensure accuracy of this document يرجى ملاحظة أن هذا المستند تم إنشاؤه بواسطة النظام يرجى مسح رمز الإستجابة أعلاه للتأكد من دقة هذا المستند

			_			لمسؤولية المدنية	
رقم الوثيقة.Policy No		رقم الوثيقة.RTA No		مدة التأمينPolicy Period			
09/601/66S/2025/34922	)	2566S34922			01/05/25	17:55 to 31/05/26 23:59	
نات المؤمن لهINSURED DETAIL	بيا				•		
Name of Insured	Aamir Raza N	Iohsin Ali				سم المؤمن له	
Address	Dubai, 000					عنوان	
Owner TCN	11416588					رمز المروري للمالك	
E-Mail	motor15@ns	ib.ae				بريد الالكتروني	
Phone No	0508463424					فم هوية المؤمن√له	
Identification No	7841985165	37374				يم الهاتف	
کبة VEHICLE DETAILS	بيانات المر						
Chassis No	Engi	ne No	Plate No	Registrat	ition Type Engine Capacity		
رقم الهيكل / الشاصي	حرك	رقم الم	رقم اللوحة	لتسجيل	صفة ا	قوة المحرك	
KMHD35LH8HU374928	N	ÍLL /	1 0000	PRIV	ATE		
Vehicle classification	Country of	Manufacture	Body Type	Manufactu	ring Year	No of Passenger + Driver	
فئة المركبة	•	بلد صنع ا	شكل الهيكل			دد الركاب + السائق	
Light Vehicle			SEDAN	203		4+1	
Purpose of use	Tonnage	e / Weight		del & Color			
صفة الاستعمال		الحمولة /	نوع المركبة ولونها				
PRIVATE			<b>V</b> 33 + 3		ELANTRA	ELANTRA Silver	
Vehicle`s Insured value	AED 1.00	/-				المركبة قيمة	
Total Agreed Premium	0 /- + VAT ( 31.50 ) = AED 661.50 /-				المتَّفق التأمين قسط إجمال		
Geographical Coverage Area United Aral		b Emirates Only				التغطية حدود	
Third Party Property Damage Limit AED 2,000		,000 /-			ميب الأشياء والممتلكات - درهم حدود علية الأضرار التي		
CONDITIONS/RIDERS. Personal Accident Drive CITY LIMIT)			ILVER COVE	R (LIMITED 1	ΓO 3 SERV	ICES PER YEAR - WITHIN	
Dubai National Insurance & Reinsurance P.S.C comp declares that the Motor Vehicle detailed above in th Schedule is insured with it according to the provision this Policy.			دة 5	فر شركة دبي الوطنية للتأمين وإعادة التأمين بأن المركبة الواردة ياناتها في هذا الجدول مؤمنة لديها وفقا لأحكام هذه الوثيقة			
I read all the terms, con and have agreed to it.R FULL COVERAGE & EXC Regulation of Unifying N according to Insurance Decision No. (25) of 201	EFER TO POLIO LUSIONS issue Motor Vehicle I Authority Boal	CY WORDINGS F ed pursuant to t insurance Policion rd of Directors'	OR Ash	اناّت الُوثيقة المركبات سندا بتاريخ	واردة في بيا التأمين على م (25 (لسنة	للعت على كافة شروط واستثناءات ود واحكام التغطية والإستثناءات ال صادرة بموجب نظام توحيد وثائق ا فرار مجلس إدارة هيئة التأمين رقه نُر.م.ع 2016 22.09.2016 و واف	
Issued by & Issue date		BN5085 01/05	/25 17:55			وتاريخ مركز	
Signature & Company S	tamn					ـــــــــــــــــــــــــــــــــــــ	
Signature & Company J	COLLID	1			وسر		
Name & Signature of Ins	sured				C	مؤمن له مؤمن له	



دبي الوطنية للتأمين وإعادة التأمين ش.م.ع Pubai National Insurance & Reinsurance P.S.C.

P.O. Box: 1806 Dubai, UAE, T: 04 596 9666, F: 04 295 6711, E: info@dni.ae, W: www.dni.ae







Please note this is a system generated document. Kindly scan the QR code above to ensure accuracy of this document برجي ملاحظة أن هذا المستند تم إنشاؤه بواسطة النظام برجي مسح رمز الإستجابة أعلاه للتأكد من دقة هذا المستند

## **Policy Specific Conditions**

MT0033 - Personal Accident Driver

It is hereby understood and agreed that in consideration of the payment of an additional premium the company undertakes to pay compensation on the scale provided hereunder for death or bodily injury as hereinafter defined sustained by The Insured And/Or any licensed driver in direct connection with any motor car described in the schedule hereto whilst mounting into or dismounting from or traveling in the insured car caused by violent accidental external and visible means, which independently of any other cause (excepting medical or surgical treatment consequent upon such injury ) shall within three calendar months of the occurrence of such injury result in :

No.	Description	Scale compensation	01
1.	Death or permanent total disablement	Dh.200,000 /-	
2.	Total and incurable loss of all vision in both eyes	Dh.200,000 /-	
3.	Total loss by physical severance at or above the wrist or ankle of both hands or both feet or of one together with one foot	Dh.200,000 /-	
4.	Total loss by physical severance at or above the wrist or ankle of one hand or one foot together with the total and incurable loss of one eye vision	Dh.200,000 /-	
5.	Total and incurable loss of one eye vision	Dh.100,000 /-	
6.	Total loss by physical severance at or above the wrist or ankle of one hand or one foot	Dh.100,000 /-	
7.	Permanent partial disability not mentioned in the table hereinabove: The value of compensation will be specified for the person on the basis of percentage for the permanent partial disability approved by medical board multiplied by insurance amount	Dh.200,000 /-	

## **Conditions:**

- a) Compensation shall be payable under one item only of item (1) to (6) for item (7) separately in addition to items (5) or (6) above in respect of each person arising out of one occurrence and the total liability of the company shall not in the aggregate exceeding the sum of Dhs. 200,000/during any one period of insurance.
- b) the legal representative for the dead person And/Or the injured person undertake to provide the company with the death certificate or final disability report issued by governmental hospital in addition to the required traffic penal documents.
- c) No compensation shall be payable in respect of death or injury indirectly or directly wholly or partially arising out of or resulting form or traceable to:
  - 1. Intentional self-injury or attempted suicide, physical and/or mental defect or infirmity.
  - 2.An accident happening whilst such person is under the influence of intoxicating liquor or drugs.
- 3. Number of vehicle passengers at the time of the accident exceed the authorized seating of the vehicle capacity.
- d) Compensation shall be payable only with the approval of the insured and directly to the injured person or to his legal personal representative whose receipt shall be a full discharge in respect of Ver 1.0 injury to such person.
- e) Total number of passengers including the divershall not exceed the authorized seating capacity of the vehicle at the time of accident Motor Dept.

Subject otherwise to the same terms, conditions exceptions and limitations of the side policy.

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MT6841 - ROADSIDE ASSISTANCE SILVER COVER (LIMITED TO 3 SERVICES PER YEAR - WITHIN CITY LIMIT)

This policy includes road sides assistance cover and additional benefits as per the list below provided by a third party service provider "International Motoring Club" (IMC) for the Insured vehicle including the following:

- 1.Free Accidental Towing Service (Within the same Emirates)
- 2. Free Mechanical Breakdown Towing Service (Within the same Emirates)
- 3. Free Battery Boosting Service
- 4.Free Flat Tyre Fixing
- 5.Free Lock-out Service

Dubai National Insurance and Reinsurance has appointed "IMC" to provide the above services as optional for the insured. It's hereby understood and agreed that the insured will have the right to accept or reject any of these service benefits before utilizing the same under his own personal responsibility. Dubai National Insurance and Reinsurance should not be held responsible or liable for any losses, damages or any sort of inconveniences as a result of utilizing any of the IMC services benefits.

To avail these services, the insured should contact IMC directly on 600 575751

Ver 1.0



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